

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:
402160756
Date Received:
08/28/2019

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

2 of 2 CAs from the FIR responded to on this Form

2 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 6720
Name of Operator: ROBERT L BAYLESS PRODUCER LLC
Address: P O BOX 168
City: FARMINGTON State: NM Zip: 87499
Contact Name and Telephone:
Name: _____
Phone: () _____ Fax: () _____
Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>Trujillo, Helen</u>		<u>notices@rlbayless.com</u>
<u>Kellerby, Shaun</u>	<u>970-712-1248</u>	<u>shaun.kellerby@state.co.us</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 679703455
Inspection Date: 03/25/2019 FIR Submit Date: 03/26/2019 FIR Status: _____

Inspected Operator Information:

Company Name: ROBERT L BAYLESS PRODUCER LLC Company Number: 6720
Address: 621 17TH ST STE 2300
City: DENVER State: CO Zip: 80293

LOCATION - Location ID: 315358

Location Name: PHILADELPHIA CREEK-62S101W Number: 15SENE County: RIO BLANCO
Qtrqtr: SENE Sec: 15 Twp: 2S Range: 101W Meridian: 6
Latitude: 39.876290 Longitude: -108.711780

FACILITY - API Number: 05-103-00 Facility ID: 230694

Facility Name: PHILADELPHIA CREEK Number: 21
Qtrqtr: SENE Sec: 15 Twp: 2S Range: 101W Meridian: 6
Latitude: 39.876290 Longitude: -108.711780

CORRECTIVE ACTIONS:

1 CA# 123475

Corrective Action: Comply with Rule 1003.a Date: 04/15/2019

Response: CA COMPLETED Date of Completion: 05/07/2019

Operator Comment: DEADMAN MARKED

COGCC Decision: _____

COGCC
Representative: _____

2 CA# 123476

Corrective Action: If not already done, submit an eForm 15 Pit Report to update COGCC records with current information to comply with rule 903.a.

Date: 01/23/2019

Response: CA COMPLETED

Date of Completion: 05/07/2019

Operator
Comment: APP FOR EARTHEN PIT WAS ISSUED IN 1981

COGCC Decision: _____

COGCC
Representative: _____

OPERATOR COMMENT AND SUBMITTAL

Comment: _____

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: HELEN TRUJILLO

Signed: _____

Title: PROD & REG ANALYST

Date: 8/28/2019 7:00:50 PM

ATTACHMENT LIST

View Attachments in Imaged Documents on COGCC website (<http://ogccweblink.state.co.us/>) - Search by Document Number.

Document Number **Description**

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Total Attach: 0 Files